

10/590295

IAP9 Rec'd PCT/PTO 23 AUG 2006  
APPLICATION DATA SHEET

APPLICATION INFORMATION

Application Type:: REGULAR  
Subject Matter:: UTILITY  
CD-ROM or CD-R?:: NONE  
Title:: CONTRAST MEDIUM FOR THROMBUS  
FORMATION  
Attorney Docket Number:: 294884US0PCT

INVENTOR INFORMATION

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: Japan  
Status:: FULL CAPACITY  
Given Name:: Yoshihiro  
Family Name:: MURAKAMI  
City of Residence:: Chuo-ku  
State or Province of Residence:: Tokyo  
Country of Residence:: Japan  
Street of Mailing Address:: c/o Astellas Pharma Inc., 3-11,  
Nihonbashi-Honcho 2-chome  
City of Mailing Address:: Chuo-ku  
State or Province of Mailing Address:: Tokyo  
Country of Mailing Address:: Japan  
Postal or Zip Code of Mailing Address:: 103-8411

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: Japan  
Status:: FULL CAPACITY  
Given Name:: Toshiaki  
Family Name:: AOKI  
City of Residence:: Chuo-ku  
State or Province of Residence:: Tokyo  
Country of Residence:: Japan  
Street of Mailing Address:: c/o Astellas Pharma Inc., 3-11,  
Nihonbashi-Honcho 2-chome  
City of Mailing Address:: Chuo-ku  
State or Province of Mailing Address:: Tokyo  
Country of Mailing Address:: Japan  
Postal or Zip Code of Mailing Address:: 103-8411

Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	Japan
Status::	FULL CAPACITY
Given Name::	Hiroyuki
Family Name::	TAKAMATSU
City of Residence::	Hamamatsu-shi
State or Province of Residence::	Shizuoka
Country of Residence::	Japan
Street of Mailing Address::	2-22-39, Shizimiduka
City of Mailing Address::	Hamamatsu-shi
State or Province of Mailing Address::	Shizuoka
Country of Mailing Address::	Japan
Postal or Zip Code of Mailing Address::	432-8018
Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	Japan
Status::	FULL CAPACITY
Given Name::	Shintaro
Family Name::	NISHIMURA
City of Residence::	Chuo-ku
State or Province of Residence::	Tokyo
Country of Residence::	Japan
Street of Mailing Address::	c/o Astellas Pharma Inc., 3-11, Nihonbashi-Honcho 2-chome
City of Mailing Address::	Chuo-ku
State or Province of Mailing Address::	Tokyo
Country of Mailing Address::	Japan
Postal or Zip Code of Mailing Address::	103-8411
Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	Japan
Status::	FULL CAPACITY
Given Name::	Kazuhiko
Family Name::	OSODA
City of Residence::	Chuo-ku
State or Province of Residence::	Tokyo
Country of Residence::	Japan
Street of Mailing Address::	c/o Astellas Pharma Inc., 3-11, Nihonbashi-Honcho 2-chome
City of Mailing Address::	Chuo-ku
State or Province of Mailing Address::	Tokyo
Country of Mailing Address::	Japan
Postal or Zip Code of Mailing Address::	103-8411

#### CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 22850

#### REPRESENTATIVE INFORMATION

Representative Customer Number:: 22850

#### DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/JP05/00308	01/13/05

#### FOREIGN PRIORITY INFORMATION

Application Number:	Country::	Filing Date::	Priority Claimed::
2004-049996	Japan	02/25/04	YES

#### ASSIGNMENT INFORMATION

Assignee Name:: Astellas Pharma Inc.  
Street of Mailing Address:: 3-11, Nihonbashi-Honcho 2-chome  
City of Mailing Address:: Chuo-ku  
State or Province of Mailing Address:: Tokyo  
Country of Mailing Address:: Japan  
Postal or Zip Code of Mailing Address:: 103-8411